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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF NEW YORK | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|---|--|---|---|
| | - | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Robert First name R. Middle name | | First name Middle name |
| | Bring your picture identification to your meeting with the trustee. | Donnelly Last name and Suffix (Sr., Jr., II, III) | _ | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4359 | | |

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Case number (if known)

Debtor 1 Robert R. Donnelly

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|----|--|---|--|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ☐ I have not used any business name or EINs. DBA Bob's Property Maintenance Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs | | | |
| 5. | Where you live | 234 Ballyhack Road | If Debtor 2 lives at a different address: | | | |
| | | Port Crane, NY 13833 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Broome | | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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Case number (if known) Debtor 1 Robert R. Donnelly

| Bankruptcy Code you are choosing to file under Chapter 7 Chapter 11 | r a brief description of each, see also, go to the top of page 1 and | | | C. § 342(b) for Individu | uals Filing for Bankruptcy | | | | | | | | |
|---|---|--------------|---------------------|--------------------------|------------------------------|--|--|--|--|--|--|--|--|
| ☐ Chapter 7 | | | | | | | | | | | | | |
| <u>_</u> | | | | | ☐ Chapter 7 | | | | | | | | |
| ☐ Chapter 12 | | | | | | | | | | | | | |
| | | ☐ Chapter 12 | | | | | | | | | | | |
| ■ Chapter 13 | | | | | | | | | | | | | |
| · | | | | | | | | | | | | | |
| about ho order. If | the entire fee when I file my pw you may pay. Typically, if you your attorney is submitting your puted address. | are paying | the fee yourself, y | ou may pay with cash | n, cashier's check, or money | | | | | | | | |
| | pay the fee in installments. If | • | e this option, sign | and attach the Applica | ation for Individuals to Pay | | | | | | | | |
| | <i>The Filing Fee in Installment</i> s (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judg | | | | | | | | | | | | |
| but is no | is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty olies to your family size and you are unable to pay the fee in installments). If you choose this option, you must | | | | | | | | | | | | |
| | cation to Have the Chapter 7 Fili | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| D. Have you filed for No. bankruptcy within the last 8 years? | | | | | | | | | | | | | |
| | Northern District of | | | | | | | | | | | | |
| Dis | | When | 6/22/15 | Case number | 15-60940 | | | | | | | | |
| Dis | Northern District Of New York | When | 2/12/14 | Case number | 14-60201 | | | | | | | | |
| Dis | rict | When | | Case number | | | | | | | | | |
| | | | | | | | | | | | | | |
| 10. Are any bankruptcy ■ No | | | | | | | | | | | | | |
| cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? | | | | | | | | | | | | | |
| Deb | tor | | | Relationship to y | | | | | | | | | |
| Dis | | When | | Case number, if | | | | | | | | | |
| Del | | \A/I: | | Relationship to y | | | | | | | | | |
| Dis | rict | When | | Case number, if | known | | | | | | | | |
| | to line 12. | | | | | | | | | | | | |
| residence? | s your landlord obtained an evic | tion judgm | ent against you an | d do you want to stay | in your residence? | | | | | | | | |
| | No. Go to line 12. | | | | | | | | | | | | |
| | Yes. Fill out <i>Initial Statemen</i> bankruptcy petition. | nt About ar | n Eviction Judgmei | nt Against You (Form | 101A) and file it with this | | | | | | | | |

| Debtor 1 | Robert R. Donnelly | Document P | Case number (if known) | |
|----------|--------------------|------------|------------------------|--|
| | | | | |

| Part | Report About Any Bu | sinesses | You Own | as a Sole Propriet | tor | | | |
|---|---|----------|--|--|---|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name and location of business | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, State & ZIP Code | | | | | |
| | it to this petition. | | Chec | k the appropriate bo | x to describe your business: | | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | | | |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | | None of the above | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | | | | | | | |
| | For a definition of small | ■ No. | I am r | not filing under Chap | oter 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | |
| Part | 4: Report if You Own or | Have Any | Hazardo | ous Property or An | y Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ Na | | | | | | |
| | property that poses or is | ■ No. | | | | | | |
| | alleged to pose a threat of imminent and identifiable hazard to public health or safety? | ☐ Yes. | What is | the hazard? | | | | |
| | Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | | | | |
| For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | Where is | s the property? | | | | |
| | · | | | | Number, Street, City, State & Zip Code | | | |

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Debtor 1 Robert R. Donnelly

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

| ΑI | oout | Debtor | 2 | (Spouse | Only | in a | Joint | Case |
|----|------|--------|---|---------|------|------|-------|------|
|----|------|--------|---|---------|------|------|-------|------|

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 69 Case number (if known) Debtor 1 Robert R. Donnelly Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do □ 1.000-5.000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0.001-25.000 ☐ More than 100.000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100.000.001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million to be? □ \$100,001 - \$500,000 □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion ■ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert R. Donnelly Signature of Debtor 2 Robert R. Donnelly Signature of Debtor 1 Executed on March 8, 2017 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Robert R. Donnelly Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Peter A. Orville | Date | March 8, 2017 |
|--|---------------|----------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Peter A. Orville | | |
| | | |
| Printed name | | |
| Orville & McDonald Law, P.C. | | |
| Firm name | | |
| 30 Riverside Drive | | |
| Binghamton, NY 13905 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 607-770-1007 | Email address | |
| 1735935 - New York | | |
| Bar number & State | | |

| | | Docum | ent Page 8 of 69 | <u> </u> | |
|--------------------------|--------------------------|-------------------|------------------|----------|--------------------------------------|
| Fill in this inform | mation to identify your | case: | | | |
| Debtor 1 | Robert R. Donnel | lly | | | |
| | First Name | Middle Name | Last Name | _ | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | | |
| Case number _ (if known) | | | | | ☐ Check if this is an amended filing |
| | | | | | v |
| | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| _ | r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | | |
|-----|---|-------------|---------------------------|
| Pai | t 1: Summarize Your Assets | Your a | issets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 402,483.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 18,750.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 421,233.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 586,849.49 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 25,000.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 33,916.77 |
| | Your total liabilities | \$ | 645,766.26 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,530.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,530.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal | , family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

| | | Document | i age 3 oi 03 |
|----------|--------------------|----------|----------------------|
| Debtor 1 | Robert R. Donnelly | | Case number (if know |

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$ |
|----|--|----|
| | | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|--|-------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 25,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 2,343.88 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 27,343.88 |

| | Case 17 | -00230-0 | -uu Doc 1 | | cument Page 10 of 69 | 1/11/10. | JU.J1 I | | oc main |
|------|--|----------------------|-----------------------|------------|--|---------------------------|----------------------|-------|--|
| Fill | in this information | on to identify | your case and th | nis filinç | | | | | |
| Deb | otor 1 F | Robert R. De | onnelly | | | | | | |
| | | irst Name | Middle | Name | Last Name | | | | |
| | otor 2 use, if filing) F | irst Name | Middle | Name | Last Name | | | | |
| | • | | that NODTLIED | N DICT | DICT OF NEW YORK | | | | |
| Uni | ted States Bankru | ptcy Court for | the: NORTHER | ו פוט או | RICT OF NEW YORK | | | | |
| Cas | se number | | | | | | | | Check if this is an |
| | | | | | | | | | amended filing |
| | | | | | | | | | |
| Of | ficial Form | 106A/E | 3 | | | | | | |
| | chedule A | | _ | | | | | | 12/15 |
| | | | | | only once. If an asset fits in more than one | | 4 4b a a a a a 4 i m | 4600 | |
| hink | it fits best. Be as | complete and | accurate as possibl | e. If two | married people are filing together, both are | e equally resp | onsible for su | pplyi | ng correct |
| | mation. If more spa ver every question. | | attach a separate si | heet to t | his form. On the top of any additional pages | s, write your r | ame and case | nun | nber (if known). |
| Dow | 4. Describe Feeb | . Daoidanas D | | har Daal | Estate You Own or Have an Interest In | | | | |
| ган | Describe Laci | i Nesidelice, D | unung, Lanu, or Ot | ilei Neai | Estate Tod Own of Have an interest in | | | | |
| 1. D | o you own or have | any legal or eq | uitable interest in a | ny resid | lence, building, land, or similar property? | | | | |
| | No. Go to Part 2. | | | | | | | | |
| | Yes. Where is the | property? | | | | | | | |
| | | 1 -1 - 7 | | | | | | | |
| | | | | | | | | | |
| 1.1 | | | | What | t is the property? Check all that apply | | | | |
| | 11 Duke Stree | et | | | Single-family home | Do not ded | uct secured cla | ims o | or exemptions. Put |
| | Street address, if avai | ilable, or other des | cription | | Duplex or multi-unit building | | | | ms on Schedule D: ecured by Property. |
| | | | | | Condominium or cooperative | Oroundro I | | | carca sy r reporty. |
| | | | | | Manufactured or mobile home | | | | |
| | Binghamton | NY | 13903-0000 | _ | Land | Current va entire prop | | | rrent value of the rtion you own? |
| | City | State | ZIP Code | | Investment property | | 8,000.00 | | \$4,000.00 |
| | | | | | Timeshare | Describe t | ne nature of v | our o | wnership interest |
| | | | | | | (such as fe | e simple, ten | | by the entireties, or |
| | | | | Who | has an interest in the property? Check one | a life estat | e), if known. | | |
| | Broome | | | | 200.0 0, | | | | |
| | County | | | | · · · · · · · | | | | |
| | - | | | _ | At least one of the debtors and another | | if this is com | mun | ity property |
| | | | | Othe | r information you wish to add about this ite | , | , | | |
| | | | | | erty identification number | , | | | |

Official Form 106A/B Schedule A/B: Property page 1

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| Deb | tor 1 | Robert R. | Donnelly | / | D00 | Cas | se nur | mber (if known) | |
|-----|--------|-----------------------------------|-------------|------------------------|----------------|---|--------------|--|---|
| | If yo | u own or hav | ve more | than one, list h | ere: | | | | |
| 1.2 | | | | | What | t is the property? Check all that apply | | | |
| | | Dwight Aven address, if available | | cription | | Duplex or multi-unit building | the | e amount of any secure | aims or exemptions. Put d claims on <i>Schedule D:</i> ms <i>Secured by Property.</i> |
| | Endi | icott | NY | 13760-0000 | | Manufactured or mobile home | | urrent value of the tire property? | Current value of the portion you own? |
| | City | | State | ZIP Code | Uho | Timeshare | _ (s | | \$35,000.00 rour ownership interest ancy by the entireties, or |
| | County | | | | | Debtor 1 and Debtor 2 only | ⊡ :em, sı | Check if this is con (see instructions) uch as local | nmunity property |
| 1.3 | If yo | u own or hav | ve more | than one, list h | | t is the property? Check all that apply | | | |
| 1.0 | 111 | Liberty Stree | et | | _ | | D | not doduct cooured al | aims or exemptions. Put |
| | | address, if available | | cription | | Duplex or multi-unit building | the | e amount of any secure | alms or exemptions. Put d claims on Schedule D: ms Secured by Property. |
| | Bing | jhamton | NY State | 13901-0000 ZIP Code | | | | urrent value of the tire property? \$25,000.00 | Current value of the portion you own? \$25,000.00 |
| | | | | | □ □ Who | | _ (s | | our ownership interest ancy by the entireties, or |
| | Broo | ome | | | _ | , | _ | | |
| | County | | | | □ □ Othe | Debtor 1 and Debtor 2 only | ⊏ tem, si | Check if this is con (see instructions) | nmunity property |

Official Form 106A/B Schedule A/B: Property

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| Debtor | 1 Robert R. | Donnelly | / | | Cas | e number (if known) | |
|------------------|----------------------------|-----------------|------------------|------|---|---|----------------------------|
| | you own or ha | ve more | than one, list h | | | | |
| 1.4 | 00.11 | | | Wha | t is the property? Check all that apply | | |
| | 92 Henry Stree | | aviati a a | | Single-family home | Do not deduct secured cla the amount of any secure | |
| Sti | reet address, if available | e, or other des | cription | | Duplex or multi-unit building | Creditors Who Have Clair | |
| | | | | | Condominium or cooperative | | |
| | | | | | Manufactured or mobile home | Current value of the | Current value of the |
| В | inghamton | NY | 13901-0000 | | Land | entire property? | portion you own? |
| Cit | ty | State | ZIP Code | | Investment property | \$22,093.00 | \$22,093.00 |
| | | | | | | Describe the nature of y | our ownership interest |
| | | | | | Other | (such as fee simple, ten | ancy by the entireties, or |
| | | | | _ | has an interest in the property? Check one | a life estate), if known. | |
| _ | | | | | | | |
| | roome | | | | Debtor 2 only | | |
| Co | ounty | | | | Debtor 1 and Debtor 2 only | ☐ Check if this is com | munity property |
| | | | | | At least one of the debtors and another | (see instructions) | ,, , , |
| If 1.5 | you own or ha | ve more | than one, list h | | t is the property? Check all that apply | | |
| | 0 Kress Street | | | | | Do not deduct secured cla | nime or exemptions. But |
| Sti | reet address, if available | e, or other des | cription | | | the amount of any secure | d claims on Schedule D: |
| | | | | | | Creditors Who Have Clair | ns Secured by Property. |
| | | | | | Condominant of cooperative | | |
| | | | | | Manufactured or mobile home | Current value of the | Current value of the |
| В | inghamton | NY | 13903-0000 | | Land | entire property? | portion you own? |
| Cit | ty | State | ZIP Code | | Investment property | \$40,000.00 | \$40,000.00 |
| | | | | | Timeshare | Describe the nature of y | our ownershin interest |
| | | | | | Other | (such as fee simple, ten | ancy by the entireties, or |
| | | | | Who | has an interest in the property? Check one | a life estate), if known. | |
| _ | | | | | Debtor 1 only | | |
| | roome | | | | | | |
| Co | ounty | | | | | ☐ Check if this is com | nmunity property |
| | | | | | | (see instructions) | · · · · |
| | | | | | er information you wish to add about this ite | em, such as local | |
| | | | | prop | erty identification number: | | |

Official Form 106A/B Schedule A/B: Property page 3

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| Debtor 1 | Robert R | . Donnelly | / | D00 | Case | e num | ber (if known) | |
|----------|------------------------|--------------------|------------------|------|--|---------|--|--|
| 1.6 | ou own or h | ave more | than one, list h | | t is the preparty? Check all that each | | | |
| | B East Frank | lin Stroot | | | t is the property? Check all that apply | | | |
| | et address, if availal | | scription | | Single-family home | | | aims or exemptions. Put d claims on <i>Schedule D:</i> |
| 000 | or address, ir availai | 510, 51 511151 455 | onpuon | | , | | | ns Secured by Property. |
| | | | | | Condominium or cooperative | | | |
| | | | | | Manufactured or mobile home | _ | | 0 |
| End | dicott | NY | 13760-0000 | | Land | | rent value of the ire property? | Current value of the portion you own? |
| City | | State | ZIP Code | | Investment property | | \$34,247.00 | \$34,247.00 |
| | | | | | Timeshare | Dad | ariba tha matura of : | |
| | | | | | Other | | | our ownership interest ancy by the entireties, or |
| | | | | Who | has an interest in the property? Check one | a lii | fe estate), if known. | |
| | | | | | Debtor 1 only | | | |
| Bro | oome | | | | Debtor 2 only | | | |
| Coun | nty | | | | Debtor 1 and Debtor 2 only | _ | Check if this is con | munity property |
| | | | | | At least one of the debtors and another | Ц | (see instructions) | many property |
| 1.7 | ou own or h | ave more | than one, list h | | t is the property? Check all that apply | | | |
| | East Frank | | | | Single-family home | | | aims or exemptions. Put |
| Stree | et address, if availal | ble, or other des | scription | | Duplex or multi-unit building | | , | d claims on Schedule D: ms Secured by Property. |
| | | | | | Condominium or cooperative | 0/0 | anors who have oldin | no occured by 1 toporty. |
| | | | | | Manufacturad or mahila hama | | | |
| End | dicott | NY | 13760-0000 | _ | | | rent value of the | Current value of the |
| | uicott | | | | | ent | ire property? | portion you own? |
| City | | State | ZIP Code | | | | \$18,000.00 | \$18,000.00 |
| | | | | | | | | our ownership interest |
| | | | | | has an interest in the property? Check one | | ch as fee simple, ten fe estate), if known. | ancy by the entireties, or |
| | | | | WIIO | Debtor 1 only | | , | |
| Bro | oome | | | | | | | |
| Coun | | | | | | | | |
| | • | | | | | | Check if this is con (see instructions) | munity property |
| | | | | | r information you wish to add about this ite | m sur | (, | |
| | | | | | erty identification number: | , उत्पर | 20 10041 | |
| | | | | 210 | East Franklin St. | | | |

Official Form 106A/B Schedule A/B: Property page 4

Endicott, NY

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| Debte | or 1 Robert R | . Donnelly | / | DUC | Case | number (if known) | |
|-------|---|------------------|------------------------|--------------|--|--|---|
| 1.8 | | ave more | than one, list h | ere: What | Case is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$2,326.00 Describe the nature of y (such as fee simple, ten | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,326.00 |
| _ | Broome County | | | □ □ □ Othe | Debtor 2 only Debtor 1 and Debtor 2 only | a life estate), if known. ☐ Check if this is com (see instructions) n, such as local | nmunity property |
| 1.9 | If you own or h Personal reside 234-236 Ballyha Street address, if availat | ence ack Road | than one, list h | | s is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative | Do not deduct secured class the amount of any secure Creditors Who Have Claim | d claims on Schedule D: |
| _ | Port Crane City Broome | NY State | 13833-0000 ZIP Code | | | Current value of the entire property? \$36,119.00 Describe the nature of y (such as fee simple, ten a life estate), if known. | Current value of the portion you own? \$36,119.00 our ownership interest ancy by the entireties, or |
| _ | County | | | | Debtor 1 and Debtor 2 only | Check if this is com | nmunity property |

other information you wish to add about this item, such as local property identification number:

Official Form 106A/B

| Debtor | 1 Robert R. | Donnelly | 1 | Doc | ument | Page 15 of 69 _{Cas} | e num | ber (if known) | |
|----------|--|----------------|------------------------|----------|--|--|------------|---|---|
| | you own or hav | ve more | than one, list h | ere: | | | | | |
| 1.1 0 | | | | What | is the proper | ty? Check all that apply | | | |
| _ | 1 Montgomery street address, if available | | cription | | · | home ulti-unit building n or cooperative | the | amount of any secured | ims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> . |
| Cit | inghamton ty | NY State | 13901-0000 ZIP Code | | Manufactured Land Investment p Timeshare Other | d or mobile home | ent De: | | Current value of the portion you own? \$40,698.00 |
| | | | | _ | | st in the property? Check one | | cn as fee simple, tens fe estate), if known. | ancy by the entireties, or |
| | punty | | | | At least one | Debtor 2 only of the debtors and another you wish to add about this ite | | Check if this is com (see instructions) | munity property |
| lf | you own or hav | ve more | than one, list h | ere: | | | | | |
| | 9 Julian Street reet address, if available | , or other des | cription | What | Single-family Duplex or mu | ty? Check all that apply home ulti-unit building n or cooperative | the | amount of any secured | ims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. |
| B) | inghamton | NY State | 13905-0000 ZIP Code | | Land Investment p | d or mobile home | | rrent value of the ire property? \$25,000.00 | Current value of the portion you own? |
| | | | | □ Who | Timeshare Other has an interes Debtor 1 only | st in the property? Check one | (su | | our ownership interest ancy by the entireties, or |
| В | roome | | | | Debtor 2 only | , | | | |
| Со | ounty | | | | | Debtor 2 only of the debtors and another | | Check if this is com (see instructions) | munity property |

Other information you wish to add about this item, such as local property identification number:

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| | | What is the property? Check all that apply | |
|--|------------------------------|---|--|
| 714 Pleasant Hi Street address, if availab | | ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative | Do not deduct secured claims or exemptions. P the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Proper |
| Port Crane City Broome County | NY 13833-0000 State ZIP Code | Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: | Current value of the entire property? portion you own? \$60,000.00 \$30,000 Describe the nature of your ownership intere (such as fee simple, tenancy by the entiretie a life estate), if known. Check if this is community property (see instructions) |
| | | 714 Pleasant Hill Rd. | |
| If you own or ha | | 714 Pleasant Hill Rd. Colesville, NY 50% ownership here: What is the property? Check all that apply Single-family home Duplex or multi-unit building | Do not deduct secured claims or exemptions. F the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Proper |
| 206 Porter Hollo | ow Road | 714 Pleasant Hill Rd. Colesville, NY 50% ownership here: What is the property? Check all that apply Single-family home | the amount of any secured claims on Schedule |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 7

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Case number (if known)

Debtor 1 Robert R. Donnelly 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chrysler 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Town and Country** Model: ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2005 Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$1,000.00 \$1,000.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Ford Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: **Explorer** Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2001 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$1,500.00 \$1,500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Suzuki 3.3 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **GZ250** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2011 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$1,800.00 \$1,800.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Kawasaki Who has an interest in the property? Check one 34 Make: the amount of any secured claims on Schedule D: Motorcycle Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another 93 Kawasaki motorcycle \$1.500.00 \$1.500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Dodge 3.5 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Ram Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 1999 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$1,000.00 \$1,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No

Official Form 106A/B

☐ Yes

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Case number (if known) Debtor 1 Robert R. Donnelly 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$6,800.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... **Household Goods** \$2,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... \$450.00 3 handguns 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$1,000.00 Wearing Apparel Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ No

Yes. Give specific information.....

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Case number (if known) Document Debtor 1 Robert R. Donnelly

| | Tools-various. Related to rental prop | porty maintonanco & ronair | \$2,000.00 |
|-----|---|--|---|
| _ | 100is-various. Related to rental prop | ету папценансе о геран | Ψ2,000.00 |
| | | | |
| 15 | Add the dollar value of all of your entries from Part 3, including a for Part 3. Write that number here | | \$5,450.00 |
| Pa | Part 4: Describe Your Financial Assets | | |
| | Do you own or have any legal or equitable interest in any of the follow | ving? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | 16. Cash Examples: Money you have in your wallet, in your home, in a safe dep ■ No □ Yes | | tition |
| 17. | 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates institutions. If you have multiple accounts with the same institutions. | of deposit; shares in credit unions, brokerage | e houses, and other similar |
| | □ No ■ YesInstitution | name: | |
| | 17.1. Bank Acc | counts | \$6,000.00 |
| | ■ No □ Yes Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincipoint venture | corporated businesses, including an inter | est in an LLC, partnership, and |
| | ■ No □ Yes. Give specific information about them Name of entity: | % of ownership: | |
| | 20. Government and corporate bonds and other negotiable and non-n Negotiable instruments include personal checks, cashiers' checks, pro Non-negotiable instruments are those you cannot transfer to someone ■ No □ Yes. Give specific information about them Issuer name: | omissory notes, and money orders. | |
| 21. | 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift saving | gs accounts, or other pension or profit-sharir | ng plans |
| | ☐ Yes. List each account separately. Type of account: Institution | name: | |
| 22. | Security deposits and prepayments Your share of all unused deposits you have made so that you may cor Examples: Agreements with landlords, prepaid rent, public utilities (ele | | vanies, or others |
| | ■ No □ Yes Institution | name or individual: | |
| | 23. Annuities (A contract for a periodic payment of money to you, either for No | or life or for a number of years) | |
| | Yes Issuer name and description. | | |
| 24. | 24. Interests in an education IRA, in an account in a qualified ABLE pr | ogram, or under a qualified state tuition p | orogram. |

page 10 Official Form 106A/B Schedule A/B: Property

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

Case 17-60290-6-dd Doc 1 Filed 03/17/17 Entered 03/17/17 16:56:57 Page 20 of 69 Document Debtor 1 Case number (if known) Robert R. Donnelly ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No $\hfill \square$ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation. Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No

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☐ Yes. Give specific information..

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| Debto | or 1 Robert R. Donnelly Case | number (if known) |
|----------------|---|--|
| | | |
| | Add the dollar value of all of your entries from Part 4, including any entries for pages you he for Part 4. Write that number here | |
| Part 5 | Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part | 1. |
| 37 D o | you own or have any legal or equitable interest in any business-related property? | |
| | No. Go to Part 6. | |
| | Yes. Go to line 38. | |
| | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. A | ccounts receivable or commissions you already earned | |
| | No No Provide | |
| Ц | Yes. Describe | |
| | ffice equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, to No Yes. Describe | elephones, desks, chairs, electronic devices |
| | | |
| | Computer, printer, fax, cabinets | \$500.0 |
| | achinery, fixtures, equipment, supplies you use in business, and tools of your trade | |
| | Yes. Describe | |
| 41. I n | ventory | |
| | No | |
| Ц | Yes. Describe | |
| 42. I n | terests in partnerships or joint ventures | |
| | No Yes. Give specific information about them | |
| | | ownership: |
| 43. C | ustomer lists, mailing lists, or other compilations | |
| I | | |
| Ц | Oo your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | No | |
| | ☐ Yes. Describe | |
| 44. A | ny business-related property you did not already list | |
| | No Yes. Give specific information | |
| | res. Give specific information | |

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here......

\$500.00

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Case number (if known) Document Debtor 1 Robert R. Donnelly Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$402,483.00 Part 2: Total vehicles, line 5 \$6.800.00 57. Part 3: Total personal and household items, line 15 \$5,450.00 Part 4: Total financial assets, line 36 \$6,000.00 Part 5: Total business-related property, line 45 \$500.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00

\$0.00

Copy personal property total

\$18,750.00

Official Form 106A/B Schedule A/B: Property page 13

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

61.

\$18,750.00

\$421,233.00

| Robert R. Donnel | ly | | |
|-------------------------|-------------------|--|--|
| First Name | Middle Name | Last Name | |
| | | | |
| First Name | Middle Name | Last Name | |
| nkruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | |
| | | | ☐ Check if the |
| r | First Name | First Name Middle Name First Name Middle Name | First Name Middle Name Last Name First Name Middle Name Last Name |

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | |
|----|--|--------------------------------------|------|---|------------------------------------|
| | ■ You are claiming federal exemptions. 11 U | J.S.C. § 522(b)(2) | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exe | mpt, | fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Personal residence 234-236 | \$36,119.00 | | \$5,000.00 | 11 U.S.C. § 522(d)(1) |
| | Ballyhack Road Port Crane, NY 13833 Broome County Line from Schedule A/B: 1.9 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 31 Montgomery Street Binghamton, NY 13901 Broome County | \$40,698.00 | | \$1.00 | 11 U.S.C. § 522(d)(5) |
| | Line from Schedule A/B: 1.10 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 111 Dwight Avenue Endicott, NY 13760 Broome County | \$35,000.00 | | \$8,100.00 | 11 U.S.C. § 522(d)(5) |
| | Line from Schedule A/B: 1.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 210 East Franklin Street Endicott, NY 13760 Broome County | \$18,000.00 | | \$4,999.00 | 11 U.S.C. § 522(d)(5) |
| | 210 East Franklin St. Endicott, NY Line from Schedule A/B: 1.7 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 2001 Ford Explorer Line from Schedule A/B: 3.2 | \$1,500.00 | | \$1,500.00 | 11 USC § 522(d)(2) |
| | LINE HOTH SCHEUUIE AVD. 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |

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Debtor 1 Robert R. Donnelly

| | Note: Nobelt IV. Dollilelly | | | | |
|----|---|--------------------------------------|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Household Goods Line from Schedule A/B: 6.1 | \$2,000.00 | | \$2,000.00 | 11 USC § 522(d)(3) |
| | Line from Schedule A/B. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Wearing Apparel Line from Schedule A/B: 11.1 | \$1,000.00 | | \$1,000.00 | 11 USC § 522(d)(3) |
| | Line from Schedule A/B. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Tools-various. Related to rental property maintenance & repair | \$2,000.00 | | \$2,000.00 | 11 U.S.C. § 522(d)(6) |
| | Line from Schedule A/B: 14.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Computer, printer, fax, cabinets Line from Schedule A/B: 39.1 | \$500.00 | | \$375.00 | 11 U.S.C. § 522(d)(6) |
| | Line from Schedule A/B. 33.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every | | | led on or after the date of adjustme | nt.) |
| | ■ No | | | | |
| | ☐ Yes. Did you acquire the property cove | red by the exemption w | ithin 1 | ,215 days before you filed this case | ? |
| | □ No | | | | |
| | ☐ Yes | | | | |

| | | Document Pa | age 25 of 69 | | |
|--------------------------------------|---|--|--------------------------|------------------------------|-----------------------------------|
| Fill in this inf | ormation to identify you | ır case: | | | |
| Debtor 1 | Robert R. Donn | | | | |
| Debtor 2 | First Name | Middle Name Las | t Name | | |
| (Spouse if, filing) | First Name | Middle Name Las | t Name | | |
| United States | Bankruptcy Court for the | : NORTHERN DISTRICT OF NEW Y | ORK | | |
| Case number (if known) | | | | _ | c if this is an ded filing |
| Official Fo | orm 106D | | | | |
| | | Who Have Claims Se | cured by Prop | erty | 12/15 |
| | the Additional Page, fill it | If two married people are filing together, bout, number the entries, and attach it to thi | | | |
| 1. Do any credit | ors have claims secured by | y your property? | | | |
| ☐ No. Ch | eck this box and submit t | his form to the court with your other sche | edules. You have nothing | else to report on this form. | |
| Yes. Fi | II in all of the information | below. | | | |
| Part 1: Lis | t All Secured Claims | | | | |
| 2. List all secur for each claim. | red claims. If a creditor has If more than one creditor has | more than one secured claim, list the creditor s a particular claim, list the other creditors in P cal order according to the creditor's name. | | the that supports this | Column C Unsecured portion If any |
| / | e Co. Dept. of | Describe the property that coourse the o | aim: \$10,000 | .00 \$25,000.00 | \$10,000.00 |
| Creditor's N | | Describe the property that secures the classification and the secure an | | Ψ23,000.00 | Ψ10,000.00 |
| | | 13901 Broome County | 141 | | |
| | 66 e Co. Office Bldg. Imton, NY 13902 | As of the date you file, the claim is: Check apply. Contingent | all that | | |
| Number, St | treet, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | |
| Who owes the | e debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 onl ■ Debtor 2 onl | , | ☐ An agreement you made (such as mortg car loan) | age or secured | | |
| Debtor 1 and | d Debtor 2 only | ■ Statutory lien (such as tax lien, mechani | c's lien) | | |
| ☐ At least one | of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if thi community | s claim relates to a / debt | Other (including a right to offset) | | | |
| Date debt was | incurred | Last 4 digits of account number | | | |
| 2.2 Broom | e Co. Dept. of e | Describe the property that secures the c | aim: \$11,000 | .00 \$60,000.00 | \$0.00 |
| Creditor's N | Name | 714 Pleasant Hill Road Port Cran NY 13833 Broome County 714 Pleasant Hill Rd. Colesville, NY 50% ownership | ne, | | |
| Broom | e Co. Office Bldg. imton, NY 13902 | As of the date you file, the claim is: Check apply. Contingent | all that | | |
| | treet, City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the | e debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 onl | у | ☐ An agreement you made (such as mortg | age or secured | | |
| Debtor 2 onl | = | car loan) | | | |
| Debtor 1 and | d Debtor 2 only | ■ Statutory lien (such as tax lien, mechani | c's lien) | | |

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☐ Judgment lien from a lawsuit

☐ At least one of the debtors and another

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| Debtor 1 Robert R. Donnelly | | Case number (if know) | | |
|---|--|---|------------------------------------|-------------|
| First Name Middle N | lame Last Name | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |
| 2.3 Broome Co. Dept. of Finance | Describe the property that secures the claim: | \$21,000.00 | \$25,000.00 | \$0.00 |
| Creditor's Name | 39 Julian Street Binghamton, NY | - , , , , , , , , , , , , , , , , , , , | | |
| | 13905 Broome County | | | |
| Box 1766 | As of the date you file, the claim is: Check all that | | | |
| Broome Co. Office Bldg. | apply. | | | |
| Binghamton, NY 13902 | Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| _ | ☐ An agreement you made (such as mortgage or se | acurad | | |
| Debtor 1 only | car loan) | coneu | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | | | | |
| _ | Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another☐ Check if this claim relates to a | ☐ Judgment lien from a lawsuit☐ Other (including a right to offset) | | | |
| community debt | Other (including a right to offset) | | | _ |
| Date debt was incurred | Look A digita of account number | | | |
| Date dept was incurred | Last 4 digits of account number | | | |
| Broome Co. Dept. of | | | | |
| Finance | Describe the property that secures the claim: | \$7,500.00 | \$8,000.00 | \$0.00 |
| Creditor's Name | 11 Duke Street Binghamton, NY 13903 Broome County | | | |
| Box 1766 | As of the date you file, the claim is: Check all that | | | |
| Broome Co. Office Bldg. | apply. | | | |
| Binghamton, NY 13902 | Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| _ | ☐ An agreement you made (such as mortgage or se | ocured | | |
| ■ Debtor 1 only □ Debtor 2 only | car loan) | scureu | | |
| Debtor 1 and Debtor 2 only | | | | |
| | ■ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit | | | |
| ☐ At least one of the debtors and another☐ Check if this claim relates to a | ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) | | | |
| community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |
| Broome Co. Dept. of | | A40 | A A A B C C C C C C C C C C | A4A |
| Finance | Describe the property that secures the claim: | \$10,000.00 | \$34,247.00 | \$10,000.00 |
| Creditor's Name | 208 East Franklin Street Endicott, | | | |
| Day 4700 | NY 13760 Broome County | | | |
| Box 1766 Broome Co. Office Bldg. | As of the date you file, the claim is: Check all that | | | |
| Binghamton, NY 13902 | apply. | | | |
| Number, Street, City, State & Zip Code | ☐ Contingent ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mortgage or se | ecured | | |
| Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |

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| Debtor 1 Robert R. Donnelly | | Case number (if know) | | |
|---|---|-----------------------|-------------|------------|
| First Name Middle | Name Last Name | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Broome Co. Dept. of | | | | |
| Finance | Describe the property that secures the claim: | \$13,000.00 | \$18,000.00 | \$0.00 |
| Box 1766 Broome Co. Office Bldg. | 210 East Franklin Street Endicott, NY 13760 Broome County 210 East Franklin St. Endicott, NY As of the date you file, the claim is: Check all that apply. | | | |
| Binghamton, NY 13902 | Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mortgage or s | secured | | |
| Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | ■ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | <u> </u> | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Braama Ca Bant of | | | | |
| Broome Co. Dept. of Finance | Describe the property that secures the claim: | \$5,000.00 | \$22,093.00 | \$907.00 |
| Creditor's Name | 192 Henry Street Binghamton, NY 13901 Broome County | | | |
| Box 1766 | As of the date you file, the claim is: Check all that | | | |
| Broome Co. Office Bldg. Binghamton, NY 13902 | apply. | | | |
| | Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mortgage or s | secured | | |
| ☐ Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | _ ' ' ' | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Broome Co. Dept. of | | | | |
| Finance | Describe the property that secures the claim: | \$16,000.00 | \$40,000.00 | \$7,686.53 |
| Creditor's Name | 20 Kress Street Binghamton, NY 13903 Broome County | | | |
| Box 1766 Broome Co. Office Bldg. Binghamton, NY 13902 | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | An agreement you made (such as mortgage or s | secured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ■ Statutory lien (such as tax lien, mechanic's lien) | | | |

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| Debtor 1 Robert R. Donnelly | C | Case number (if know) | | |
|---|---|-----------------------|-------------|--------|
| First Name Middle N | Name Last Name | | | |
| | | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | - |
| community desi | | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |
| 2.9 Broome Co. Dept. of | Describe the property that secures the claim: | \$2,000.00 | \$2,326.00 | \$0.00 |
| Finance Creditor's Name | | ΨΣ,000.00 | ΨΣ,3Σ0.00 | ψ0.00 |
| Oreditor 3 Name | 22 Kress Street Binghamton, NY 13903 Broome County | | | |
| Box 1766 | 13303 Broome County | | | |
| Broome Co. Office Bldg. | As of the date you file, the claim is: Check all that | | | |
| Binghamton, NY 13902 | apply. Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or secu | ıred | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ■ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | | | | |
| ☐ Check if this claim relates to a | ☐ Judgment lien from a lawsuit☐ Other (including a right to offset) | | | |
| community debt | Other (including a right to offset) | | | |
| • | | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |
| 2.1 Broome Co. Dept. of Finance | Describe the property that secures the claim: | \$12,000.00 | \$40,698.00 | \$0.00 |
| Creditor's Name | 31 Montgomery Street Binghamton, | <u>Ψ.Ξ,σσσ.σσ</u> | <u> </u> | Ψ0.00 |
| ordand. C Hame | NY 13901 Broome County | | | |
| Box 1766 | 141 13301 Broome County | | | |
| Broome Co. Office Bldg. | As of the date you file, the claim is: Check all that apply. | | | |
| Binghamton, NY 13902 | □ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or secu | ıred | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ■ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a | ☐ Other (including a right to offset) | | | |
| community debt | — Other (including a right to onset) | | | |
| Date debt was in some d | | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| 2.1 Broome Co. Dept. of | | | | |
| Finance | Describe the property that secures the claim: | \$17,000.00 | \$35,000.00 | \$0.00 |
| Creditor's Name | 111 Dwight Avenue Endicott, NY | | | |
| | 13760 Broome County | | | |
| Box 1766 | | | | |
| Broome Co. Office Bldg. | As of the date you file, the claim is: Check all that apply. | | | |
| Binghamton, NY 13902 | Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mortgage or secu | ured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ■ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |

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| Debtor 1 Robert R. Donnelly | Lackbase | Case | e number (if know) | | |
|---|---|--------------------|--------------------|-------------|-------------|
| First Name Middle N | ame Last Name | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | | |
| Date debt was incurred | Last 4 digits of account number | er | | | |
| 2.1 Capital One Bank USA, | | | | | |
| 2 N.A. | Describe the property that secures th | e claim: | \$1,309.99 | \$36,119.00 | \$1,309.99 |
| Creditor's Name | Personal residence 234-236 Ballyhack Road Port Crane, N 13833 Broome County | NY | | | |
| P.O. Box 30281 Salt Lake City, UT 84130 | As of the date you file, the claim is: C apply. | heck all that | | | |
| Number, Street, City, State & Zip Code | ☐ Contingent☐ Unliquidated | | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as m | ortgage or secured | ı | | |
| Debtor 2 only | car loan) | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| ☐ At least one of the debtors and another | Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | ☐ Other (including a right to offset) | | | | |
| Date debt was incurred | Last 4 digits of account number | er | | | |
| | | | | | |
| 2.1 Daniel Blatt | Describe the property that secures th | e claim: | \$20,000.00 | \$40,698.00 | \$20,000.00 |
| Creditor's Name | 31 Montgomery Street Bingho NY 13901 Broome County | | | · , | |
| 1082 East 9th St. Brooklyn, NY 11230 | As of the date you file, the claim is: C apply. | heck all that | | | |
| Number, Street, City, State & Zip Code | ☐ Contingent☐ Unliquidated | | | | |
| Number, Street, Oity, State & Zip Code | Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | ☐ An agreement you made (such as m car loan) | ortgage or secured | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| \square At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | Second Mortga | age | | |
| Date debt was incurred | Last 4 digits of account number | er | | | |
| 2.1 | | | | | |
| Earl & Ethel Gordon | Describe the property that secures th | e claim: | \$26,367.39 | \$34,247.00 | \$0.00 |
| Creditor's Name | 208 East Franklin Street Endi NY 13760 Broome County | cott, | | | |
| 2045 Gulf Of Mexico Dr. Apt. 412 | As of the date you file, the claim is: C apply. | heck all that | | | |
| Longboat Key, FL 34228 | ☐ Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | ☐ An agreement you made (such as m car loan) | ortgage or secured | | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |

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| Debtor 1 Robert R. Donnelly | | Case | number (if know) | | |
|---|---|--------------------|------------------|------------------------|-------------|
| First Name Middle N | ame Last Name | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | Mortgage | | | |
| Date debt was incurred | Last 4 digits of account number | er | | | |
| | | | | | |
| 2.1 G. Paul Cohen & Sherry 5 Cohen | Describe the property that secures the | oo claim: | \$31,686.53 | \$40,000.00 | \$0.00 |
| Creditor's Name | 20 Kress Street Binghamton, | | | + 10,000.00 | |
| | 13903 Broome County | 141 | | | |
| 6564 Meandering Way | As of the date you file, the claim is: C | Check all that | | | |
| Bradenton, FL 34202 | apply. Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | ☐ An agreement you made (such as m | ortgage or secured | | | |
| ☐ Debtor 2 only | car loan) | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mech | hanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | Mortgage | | | |
| Date debt was incurred | Last 4 digits of account numb | er | | | |
| 2.1 GHS Federal Credit | | | | | |
| 6 Union | Describe the property that secures the | ne claim: | \$5,159.02 | \$36,119.00 | \$5,159.02 |
| Creditor's Name | Personal residence 234-236 | | | | |
| | Ballyhack Road Port Crane, I 13833 Broome County | NY | | | |
| 910 Front Street | As of the date you file, the claim is: C | heck all that | | | |
| Binghamton, NY 13902 | apply. Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | An agreement you made (such as m car loan) | ortgage or secured | | | |
| Debtor 2 only | _ | | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mech | hanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | ☐ Other (including a right to offset) _ | | | | |
| Date debt was incurred | Last 4 digits of account numb | er | | | |
| 2.1 | | | | | |
| Janice Carmine | Describe the property that secures the | ne claim: | \$15,000.00 | \$36,119.00 | \$15,000.00 |
| Creditor's Name | Personal residence 234-236 | | | | |
| | Ballyhack Road Port Crane, I | Y | | | |
| | 13833 Broome County | | | | |
| 416 West Benita Blvd. | As of the date you file, the claim is: Capply. | neck all that | | | |
| Vestal, NY 13850 | ☐ Contingent | | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | | |
| Who awas the dahts of | Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | An agreement you made (such as m car loan) | ortgage or secured | | | |
| Debtor 2 only | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mech | hanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |

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| Debtor 1 Robert R. Donnelly | | Cas | e number (if know) | | |
|--|---|---------------------|--------------------|---------------------------------------|-------------|
| First Name Middle N | lame Last Name | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | Second Mortg | age | | |
| Date debt was incurred | Last 4 digits of account num | ber | | | |
| | | | | | |
| 2.1 Jonas & Marie Nachsin | Describe the property that secures | the claim: | \$17,725.92 | \$34,247.00 | \$9,846.31 |
| Creditor's Name | 208 East Franklin Street End NY 13760 Broome County | | | · · · · · · · · · · · · · · · · · · · | <u> </u> |
| 359 5th St. Brooklyn, NY 11215 | As of the date you file, the claim is: apply. | Check all that | | | |
| Number, Street, City, State & Zip Code | ☐ Contingent ☐ Unliquidated | | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | ☐ An agreement you made (such as car loan) | mortgage or secured | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| lacksquare At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | Mortgage | | | |
| Date debt was incurred | Last 4 digits of account num | ber | | | |
| 2.4 | | | | | |
| 2.1 Kovarik True Value | Describe the property that secures | the claim: | \$4,330.68 | \$36,119.00 | \$4,330.68 |
| Creditor's Name | Personal residence 234-236 Ballyhack Road Port Crane, 13833 Broome County | | | | |
| 276 Clinton St. | As of the date you file, the claim is: apply. | Check all that | | | |
| Binghamton, NY 13905 | ☐ Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | An agreement you made (such as car loan) | mortgage or secured | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| ☐ At least one of the debtors and another | Judgment lien from a lawsuit | 0.10.110 | | | |
| ☐ Check if this claim relates to a | ☐ Other (including a right to offset) | | | | |
| community debt | | | | | |
| Date debt was incurred | Last 4 digits of account num | ber | | | |
| 2.2 | | | | | |
| Kurt Beyer | Describe the property that secures | the claim: | \$46,952.87 | \$40,698.00 | \$18,254.87 |
| Creditor's Name | 31 Montgomery Street Bingl NY 13901 Broome County | hamton, | | | |
| 29 Meadow Lake Rd. | As of the date you file, the claim is: | Check all that | | | |
| Mahwah, NJ 07430 | apply. Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| Who owes the debt? Check one. | Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as | mortgage or secured | | | |
| Debtor 2 only | car loan) | J J : | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | , | | | |

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| Debtor 1 Robert R. Donnelly | C | Case number (if know) | | |
|---|--|-----------------------|-------------|-------------|
| First Name Middle N | ame Last Name | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Mortgage | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |
| 2.2 1 Midland Funding LLC | Describe the property that secures the claim: | \$23,951.63 | \$36,119.00 | \$23,951.63 |
| Creditor's Name | Personal residence 234-236 | | <u> </u> | |
| 8875 Aero Drive, Suite | Ballyhack Road Port Crane, NY 13833 Broome County | | | |
| 200 | As of the date you file, the claim is: Check all that apply. | | | |
| San Diego, CA 92123 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or secu | ıred | | |
| ☐ Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| 2.2 NYS Dept. of Taxation & | | £4.00 | ¢07.045.00 | ¢0.00 |
| 2 Finance Creditor's Name | Describe the property that secures the claim: | \$1.00 | \$97,015.00 | \$0.00 |
| Creditor's Name | All real property | | | |
| Bankruptcy Section | | | | |
| PO Box 5300 | As of the date you file, the claim is: Check all that apply. | | | |
| Albany, NY 12205 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or secu | ıred | | |
| Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a | ☐ Other (including a right to offset) | | | |
| community debt | | | | <u>.</u> |
| Date debt was incurred | Last 4 digits of account number | | | |
| 2.2 Portfolio Recovery | | | | |
| 3 Associates | Describe the property that secures the claim: | \$10,300.00 | \$36,119.00 | \$10,300.00 |
| Creditor's Name | Personal residence 234-236 | | | |
| | Ballyhack Road Port Crane, NY | | | |
| | 13833 Broome County | | | |
| 120 Corporate Blvd | As of the date you file, the claim is: Check all that apply. | | | |
| Norfolk, VA 23502 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or secu | ıred | | |
| Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | Judgment lien from a lawsuit | | | |

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| Debtor 1 Robert R. Donnelly | Ca | se number (_{if know}) | | |
|---|--|----------------------------------|-------------|-------------|
| First Name Middle N | ame Last Name | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |
| 2.2 Robert Molino | Describe the property that secures the claim: | \$25,000.00 | \$25,000.00 | \$0.00 |
| Creditor's Name | 111 Liberty Street Binghamton, NY | | | |
| COEC Foot Downseless | 13901 Broome County | | | |
| 6056 East Peppertree Way | As of the date you file, the claim is: Check all that | | | |
| Sarasota, FL 34242 | apply. Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only □ Debtor 2 only | An agreement you made (such as mortgage or secure car loan) | ed | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Mortgage | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| 2.2 | | | | |
| 5 Seterus Inc. | Describe the property that secures the claim: | \$42,000.00 | \$36,119.00 | \$5,881.00 |
| Creditor's Name | Personal residence 234-236 Ballyhack Road Port Crane, NY | | | |
| 14523 SW Millikan Way | As of the date you file, the claim is: Check all that | | | |
| Ste 200 | apply. | | | |
| Beaverton, OR 97005 | Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mortgage or secure | ed | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Mortgage | | | |
| Date debt was incurred | Last 4 digits of account number 0029 | | | |
| 2.2 | | | | |
| Sid Krepel | Describe the property that secures the claim: | \$60,000.00 | \$60,000.00 | \$11,000.00 |
| Creditor's Name | 714 Pleasant Hill Road Port Crane, | | | |
| | NY 13833 Broome County 714 Pleasant Hill Rd. | | | |
| | Colesville, NY | | | |
| 10485 Terra Lago Dr. | 50% ownership | | | |
| West Palm Beach, FL | As of the date you file, the claim is: Check all that apply. | | | |
| 33412 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or secure | 2d | | |
| Debtor 2 only | car loan) | , <u>,</u> | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |

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| Debtor | 1 Robert R. Donnelly | | (| Case number (if know) | | |
|-------------------------------|---|--|-----------------|-----------------------|-------------|-------------|
| | First Name Middle Na | ame Last Name | _ | • | | |
| | | Undersont lies from a lawarit | | | | |
| _ | ast one of the debtors and another | ☐ Judgment lien from a lawsuit | Mortgago | | | |
| | ck if this claim relates to a nmunity debt | Other (including a right to offset) | Mortgage | | | |
| Date de | bt was incurred | Last 4 digits of account num | hor | | | |
| Date de | bt was incurred | Last 4 digits of account fluin | | | | |
| 2.2 | | | | | | |
| | teve Rowell | Describe the property that secures | the claim: | \$18,000.00 | \$22,093.00 | \$0.00 |
| Creditor's Name | | 192 Henry Street Binghamto 13901 Broome County | on, NY | | | |
| | O Box 501 estal, NY 13850 | As of the date you file, the claim is: apply. | Check all that | | | |
| | umber, Street, City, State & Zip Code | ☐ Contingent☐ Unliquidated | | | | |
| INI | umber, Street, City, State & Zip Code | ☐ Disputed | | | | |
| Who ov | wes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debt | tor 1 only | ☐ An agreement you made (such as | mortgage or sec | ured | | |
| | or 2 only | car loan) | | | | |
| | tor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| | ast one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| | ck if this claim relates to a nmunity debt | Other (including a right to offset) | Mortgage | | | |
| Date de | bt was incurred | Last 4 digits of account num | ber | | | |
| | | | | | | |
| | teve Rowell | Describe the property that secures | | \$20,000.00 | \$25,000.00 | \$16,000.00 |
| Ci | reditor's Name | 39 Julian Street Binghamtor 13905 Broome County | n, NY | | | |
| Р | O Box 501 | As of the date you file, the claim is: | Check all that | | | |
| | estal, NY 13851 | apply. Contingent | | | | |
| - | umber, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| | 7, | ☐ Disputed | | | | |
| Who ov | wes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debt | tor 1 only | ☐ An agreement you made (such as | mortgage or sec | ured | | |
| ☐ Debt | or 2 only | car loan) | | | | |
| ☐ Debt | tor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| | ast one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| | ck if this claim relates to a nmunity debt | Other (including a right to offset) | Mortgage | | | |
| | bt was incurred | Last 4 digits of account num | ber | | | |
| 2.2 V | Volla Farga Hama | | | | | |
| | /ells Fargo Home lortgage | Describe the property that secures | the claim: | \$94,564.46 | \$90,000.00 | \$4,564.46 |
| | reditor's Name | 206 Porter Hollow Road Por | | | | |
| | | NY 13833 Broome County | , , | | | |
| _ | O D 40005 | As of the date you file, the claim is: | Check all that | | | |
| | O Box 10335 les Moines, IA 50306 | apply. | | | | |
| | · | Contingent | | | | |
| N | umber, Street, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | | |
| Who owes the debt? Check one. | | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as | mortgage or sec | ured | | |
| _ | for 2 only | car loan) | 3 3 | | | |
| | tor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| | ast one of the debtors and another | ☐ Judgment lien from a lawsuit | ····, | | | |

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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| Debto | or 1 Robert R. Donnel | lv | Doddinone | i ago oc | Case number (if know) | | |
|------------------|--|---|-----------------------------|---|--|--------|--|
| | First Name | Middle Name | Last Name | _ | | | |
| | neck if this claim relates to a community debt | Other (in | ncluding a right to offset) | Mortgage | | | |
| Date d | debt was incurred | Last | 4 digits of account num | 7080 nber 7080 | | | |
| If thi | the dollar value of your ent is is the last page of your fo e that number here: | | · - | | \$586,849.49 \$586,849.49 | | |
| Part 2 | List Others to Be Not | tified for a Debt Th | at You Already Listed | d | | | |
| trying than o | to collect from you for a de | bt you owe to somed bts that you listed in | ne else, list the creditor | in Part 1, and tl | already listed in Part 1. For example, if a collection age nen list the collection agency here. Similarly, if you hav e. If you do not have additional persons to be notified fo | e more | |
| | Name, Number, Street, City, State & Zip Code Eric M. Berman PC | | On whice | On which line in Part 1 did you enter the creditor? | | | |
| | 500 North Gulph Roa King Of Prussia, PA | | | Last 4 d | ligits of account number | | |
| | Name, Number, Street, City, Law Office of Burr & Attn: Collection Supe P.O. Box 2308 Binghamton, NY 1390 | Reid ervisor | | | th line in Part 1 did you enter the creditor? 2.16 | | |
| | Name, Number, Street, City, Pressler & Pressler, I 305 Broadway, 9th FI New York, NY 10007 | LLP | | | th line in Part 1 did you enter the creditor? 2.21 | | |
| | Name, Number, Street, City, Robert Behnke, Esq. Broome Count Attorn 60 Hawley St. PO Bo. Binghamton, NY 1390 | ney x 1766 | | | ch line in Part 1 did you enter the creditor? 2.1 | | |
| | Name, Number, Street, City, Rosicki, Rosicki & As 2 Summit Court, Ste. Fishkill, NY 12524 | ssociates, P.C. | | | ch line in Part 1 did you enter the creditor? 2.25 | | |
| | Name, Number, Street, City, Rubin & Rothman, LI 1787 Veterans Highw | _C | | | th line in Part 1 did you enter the creditor? 2.12 | | |

Islandia, NY 11722

| | | | Document | Page 36 of 69 | 9 | | |
|----------------------|--|---|---|---|---------------------------|-----------------------|--------------------|
| Fill | in this information to identify | our case: | | | | | |
| Deb | otor 1 Robert R. Do | nnelly | | | | | |
| | First Name | | le Name | Last Name | | | |
| | otor 2 use if, filing) First Name | Midd | le Name | Last Name | | | |
| (ορυ | use II, IIIIIIg) FIISt Name | | | | | | |
| Uni | ted States Bankruptcy Court for t | he: NORTHE | ERN DISTRICT OF NI | EW YORK | | | |
| Cas | se number | | | | | | |
| | nown) | | | | | ☐ Check | if this is an |
| | | | | | | amend | led filing |
| ∩ff | icial Form 106E/F | | | | | | |
| | hedule E/F: Creditor: | s Who Hay | e Unsecured | Claims | | | 12/15 |
| | s complete and accurate as possib | | | | creditors with NON | DDIODITY claims 1 i | |
| Sche eft. name | edule G: Executory Contracts and Usedule D: Creditors Who Have Claim Attach the Continuation Page to the e and case number (if known). t 1: List All of Your PRIORIT | s Secured by Pro is page. If you ha | perty. If more space is ve no information to re | needed, copy the Part y | ou need, fill it out, | number the entries in | n the boxes on the |
| | Do any creditors have priority uns | | | | | | |
| | □ No. Go to Part 2. | | | | | | |
| | Yes. | | | | | | |
| | List all of your priority unsecured identify what type of claim it is. If a clipossible, list the claims in alphabetic: Part 1. If more than one creditor hold (For an explanation of each type of c | aim has both priori al order according s a particular claim | ty and nonpriority amoun to the creditor's name. If n, list the other creditors i | its, list that claim here and you have more than two in Part 3. | d show both priority a | nd nonpriority amoun | ts. As much as |
| 0.4 |] Intomot Bossess Comit | | Land A. Pattern Communication | | * 05 000 00 | amount | amount |
| 2.1 | Internal Revenue Service Priority Creditor's Name | <u>e</u> | Last 4 digits of accou | Int number | \$25,000.00 | \$25,000.00 | \$0.00 |
| | P.O. Box 21126 | | When was the debt in | curred? | | - | |
| | Philadelphia, PA 19114 Number Street City State Zlp Co | odo. | As of the date you file | e, the claim is: Check all | that apply | | |
| | Who incurred the debt? Check on | | ☐ Contingent | e, the claim is. Oneck an | шагарріу | | |
| | ■ Debtor 1 only | | ☐ Unliquidated | | | | |
| | Debtor 2 only | | ' | | | | |
| | _ · | | ☐ Disputed Type of PRIORITY un: | secured claim: | | | |
| | ☐ Debtor 1 and Debtor 2 only | | ☐ Domestic support o | | | | |
| | ☐ At least one of the debtors and a | | _ | | | | |
| | Check if this claim is for a co | mmunity debt | _ | other debts you owe the go personal injury while you | | | |
| | Is the claim subject to offset? No | | _ | personal injury write you | were intoxicated | | |
| | □ Yes | | Other. Specify | axes | | | |
| | | | | | | | |
| Par | t 2: List All of Your NONPRI | ORITY Unsecu | red Claims | | | | |
| 3. | Do any creditors have nonpriority | unsecured claims | s against you? | | | | |
| | ☐ No. You have nothing to report in | this part. Submit t | his form to the court with | your other schedules. | | | |
| | Yes. | | | | | | |
| | List all of your nonpriority unsecur unsecured claim, list the creditor sep than one creditor holds a particular cl | arately for each cla | aim. For each claim listed | d, identify what type of cla | im it is. Do not list cla | aims already included | in Part 1. If more |

Total claim

Part 2.

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Case number (if know) Debtor 1 Robert R. Donnelly 4.1 \$1,660.67 Capital One Bank USA, N.A. Last 4 digits of account number 5377 Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? 9/2003 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card ☐ Yes 4.2 Chase Bank \$2,593.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? P.O. Box 15299 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge account ☐ Yes 4.3 Credit Protection Assoc. \$3,461.00 Last 4 digits of account number 1756 Nonpriority Creditor's Name When was the debt incurred? 13355 Noel Rd. Dallas, TX 75240 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes

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Debtor 1 Robert R. Donnelly Case number (if know) 4.4 \$626.40 Direct TV Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 6550 When was the debt incurred? Greenwood VIIIage, CO 80155-6550 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Cable ☐ Yes 4.5 **GHS Federal Credit Union** 2898 \$6,358.60 Last 4 digits of account number Nonpriority Creditor's Name 910 Front Street When was the debt incurred? 12/02 Binghamton, NY 13902 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Line of credit 4.6 **NYS Workers Compensation Board** Last 4 digits of account number \$6,000.00 Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? 328 State Street Schenectady, NY 12308 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Worker's compensation fines/penalties ☐ Yes

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Debtor 1 Robert R. Donnelly Case number (if know) 4.7 \$3,461.23 **NYSEG** Last 4 digits of account number Nonpriority Creditor's Name 18 Link Drive When was the debt incurred? Binghamton, NY 13902-5224 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes 4.8 Sage Supply Last 4 digits of account number \$400.00 Nonpriority Creditor's Name When was the debt incurred? 85 Main St. Johnson City, NY 13790 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Materials** Other. Specify 4.9 **United Health Services** 5505 \$1,063.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10-42 Mitchell Avenue Binghamton, NY 13903 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes

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Debtor 1 Robert R. Donnelly

| United Health Services | Last 4 digits of account number | \$1,063.41 |
|--|---|-------------------|
| Nonpriority Creditor's Name | <u> </u> | +-, |
| PO Box 5214 Binghamton, NY 13902 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Medical | |
| Heired Oreday Aid Foods | 0242 | * 0.040.00 |
| United Student Aid Funds Nonpriority Creditor's Name | Last 4 digits of account number 0243 | \$2,343.88 |
| C/O Sallie Mae | When was the debt incurred? | |
| PO Box 9460 MCE2142 | | |
| Wilkes-Barre, PA 18773-9460 | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ■ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |
| | Student loan | |
| Visions Federal Credit Union | Last 4 digits of account number 1054 | \$4,885.58 |
| Nonpriority Creditor's Name | Last 4 digits of account number 1054 | φ+,000.00 |
| 24 McKinley Ave. | When was the debt incurred? 06/04 | |
| Endicott, NY 13760 | | |
| Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | П | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| ☐ Check if this claim is for a community debt | | |
| Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other Specify Line of credit | |
| | — Other Specify | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Debtor 1 Robert R. Donnelly | Document Pa | Case number (if know) |
|--|---|--|
| Name and Address Law Office of Burr & Reid Attn: Collection Supervisor P.O. Box 2308 Binghamton, NY 13902 | On which entry in Part 1 or Part 2 Line <u>4.5</u> of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address Law Office of Burr & Reid Attn: Collection Supervisor P.O. Box 2308 Binghamton, NY 13902 | On which entry in Part 1 or Part 2 Line 4.9 of (<i>Check one</i>): | e did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address Midland Credit Management Inc. 8875 Aero Drive, Suite 200 San Diego, CA 92123-2255 | On which entry in Part 1 or Part 2 Line 4.2 of (Check one): | e did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address Navient Solutions, Inc. Attn: Bankruptcy Dept. P.O. Box 9430 Wilkes Barre, PA 18773 | On which entry in Part 1 or Part 2 Line 4.11 of (Check one): | 2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address NYSEG PO Box 5600 Ithaca, NY 14852 | On which entry in Part 1 or Part 2 Line 4.3 of (Check one): | e did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 25,000.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 25,000.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 2,343.88 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 31,572.89 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 33,916.77 |

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| | | 1211111 | $\cdots \cdots $ | |
|---------------------|--------------------------|-------------------|---|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Robert R. Donnel | lly | | |
| l | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

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| | | Docume | nt Page 43 of | 69 | |
|-------------------------------------|---|--|-----------------------------|--|----|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Robert R. Donnel | lv | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | | |
| Case number | | | | | |
| (if known) | | | | ☐ Check if this is an amended filing | |
| Official Fo | orm 106H | | | | |
| Schedule | H: Your Code | ebtors | | 12/15 | |
| 1. Do you h □ No ■ Yes 2. Within th | ave any codebtors? (If y | . Answer every question. /ou are filing a joint case, of the case | o not list either spouse as | ? (Community property states and territories include | |
| ■ No. Go to | o line 3 | | | | |
| _ | | ise, or legal equivalent live | with you at the time? | | |
| in line 2 aga | ain as a codebtor only i), Schedule E/F (Official | f that person is a guarant | or or cosigner. Make su | f your spouse is filing with you. List the person show ure you have listed the creditor on Schedule D (Offici G). Use Schedule D, Schedule E/F, or Schedule G to | al |
| | nn 1: Your codebtor Number, Street, City, State and ZI | P Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: | |
| 61 H | n Hime omer St. hamton, NY 13905 | | | ■ Schedule D, line2.26 □ Schedule E/F, line □ Schedule G Sid Krepel | |

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| Fill | in this information to ic | lentify your ca | ase: | | | | 1 | | | |
|---|--|---|---|---|---------------------|----------------|------------------------------|---|------------------------------|-----------------|
| | | obert R. Do | | | | | | | | |
| | otor 2 | | | | | _ | | | | |
| Uni | ted States Bankruptcy | Court for the | : NORTHERN DISTRIC | CT OF NEW YORK | | _ | | | | |
| (If kr | se number | 001 | | | | | ☐ A sup | nis is: nended filing plement showir ome as of the f | | |
| | fficial Form 1 chedule I: Yo | | | | | | MM / I | DD/ YYYY | | |
| sup spo atta | plying correct inform use. If you are separa | ation. If you ated and you o this form. | sible. If two married peo are married and not fili r spouse is not filing w On the top of any additi | ng jointly, and your ith you, do not inclu | spouse ide infor | is liv mati | ing with you on about you | , include infor ir spouse. If m | mation about ore space is | your needed, |
| 1. | Fill in your employr information. | nent | | Debtor 1 | | | Del | otor 2 or non-f | iling spouse | |
| If you have more that attach a separate particular information about ac | | ge with | Employment status | ■ Employed□ Not employed | | | | Employed Not employed | | |
| | employers. | | Occupation | Landlord | | | | | | |
| | Include part-time, seaself-employed work. | asonal, or | Employer's name | Self Employed | | | | | | |
| | Occupation may include or homemaker, if it a | | Employer's address | | | | | | | |
| | | | How long employed t | here? | | | | | | |
| Par | t 2: Give Detail | s About Mor | thly Income | | | | | | | |
| | mate monthly income use unless you are sep | | ate you file this form. If | you have nothing to r | report for | any | line, write \$0 i | n the space. In | iclude your noi | n-filing |
| | u or your non-filing spo e space, attach a sepa | | ore than one employer, co this form. | ombine the informatio | on for all o | emplo | oyers for that | person on the l | lines below. If | you need |
| | | | | | | | For Debtor | | ebtor 2 or ling spouse | |
| 2. | | | ry, and commissions (b calculate what the monthl | | 2. | \$ | 0 | . 00 \$ | N/A | |
| 3. | Estimate and list m | onthly overt | ime pay. | | 3. | +\$ | 0 | .00 +\$ | N/A | |
| 4. | Calculate gross Inc | ome. Add lir | ne 2 + line 3. | | 4. | \$ | 0.0 | 0 \$ | N/A | |

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| Debt | tor 1 | Robert R. Donnelly | _ | Case | number (if known) | | | | |
|------|---------------|--|----------|---------|-------------------|-------------|----------------------|---------|----------|
| | | | | | | | | | |
| | | | | For | Debtor 1 | For | Debtor 2 | or | |
| | _ | | | | | | n-filing spo | | |
| | Cop | by line 4 here | 4. | \$_ | 0.00 | \$_ | | N/A | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$_ | 0.00 | \$_ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | | N/A | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$_ | | N/A | |
| | 5h. | Other deductions. Specify: | 5h.+ | \$_ | 0.00 | + \$_ | | N/A | |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0.00 | \$_ | | N/A | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 0.00 | \$_ | | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm | | | | | | | |
| | | Attach a statement for each property and business showing gross | | | | | | | |
| | | receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 2 900 00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ _ | 3,800.00 | \$ - | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | | Ψ_ | 0.00 | Ψ_ | | IVA | |
| | | regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | | | | | |
| | | settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | | N/A | |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | \$ | 0.00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: Odd jobs | 8h.+ | \$ | 730.00 | + \$ _ | | N/A | |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 4,530.00 | \$ | | N/A | |
| | | | _ | | | | | | |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. \$ | | 4,530.00 + \$ | | N/A = | \$ | 4,530.00 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | L | | | | | | |
| 11. | Incli othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify: | depen | | • | | Schedule J. 11. + | | 0.00 |
| | • | | | | | | \vdash | | |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | 12. | § | 4,530.00 |
| | | | | | | | _ | ombin | |
| 13 | Do | you expect an increase or decrease within the year after you file this form | 2 | | | | m | ionthly | / income |
| 10. | 5 0 (| No. | | | | | | | |
| | _ | Yes. Explain: | | | | | | | |
| | | • | | | | | | | |

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| Fill | in this informa | tion to identify yo | our case: | | | | | |
|-------------------|--|--|--------------------------------------|---|---|---------------|-------------------|-------------------------------|
| | otor 1 | | | | | Cho | ck if this is: | |
| Den | NOI I | Robert R. Do | onnelly | | | | An amended filing | |
| Deb | otor 2 | | | | | | A supplement show | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unit | ed States Bankr | ruptcy Court for the | : NORTH | IERN DISTRICT OF NEW | YORK | | MM / DD / YYYY | |
| l | e number nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| Sc | chedule | J: Your | Exper | ises | | | | 12/1 |
| Be info nur | as complete a ormation. If m mber (if know | and accurate as lore space is ne n). Answer evel | possible eded, atta ry questio | If two married people ar | | | | |
| Par 1. | t 1: Descr Is this a joir | ibe Your House | enold | | | | | |
| | No. Go to | line 2. | in a conor | ata haysahald? | | | | |
| | | | ın a separ | ate household? | | | | |
| | | | st file Offici | al Form 106J-2, <i>Expenses</i> | for Separate Housel | nold of Deb | otor 2. | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | | | | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | | □ res |
| | | | | | | | | ☐ Yes |
| 3. | expenses of yourself and | penses include f people other t d your depende | han nts? □ | No Yes | | | | |
| Est exp | imate your ex | | our bankrı | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | h assistance an | | government assistance i cluded it on <i>Schedule I:</i>) | | | Your expe | enses |
| 4. | | or home owners and any rent for th | | ses for your residence. I | nclude first mortgage | 4. \$ | 5 | 0.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | 5 | 0.00 |
| | • | rty, homeowner's | | | | 4b. \$ | <u> </u> | 0.00 |
| | | | | ıpkeep expenses | | 4c. 9 | | 0.00 |
| 5. | | owner's associat | | dominium dues our residence, such as ho | me equity loops | 4d. § 5. § | | 0.00 |
| J. | Auditional | igage payiii | citio for ye | on residence, such as 110 | ino c quity ibalis | J. (| Y | 0.00 |

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| Debtor | 1 Robert R. Donnelly | Case num | ber (if known) | |
|---------------|--|--------------|----------------|-----------------------|
| 6. U 1 | ilities: | | | |
| 68 | | 6a. | \$ | 0.00 |
| 6k | • | 6b. | \$ | 0.00 |
| 60 | | 6c. | \$ | 80.00 |
| 60 | | 6d. | \$ | 0.00 |
| | ood and housekeeping supplies | — 7. | \$ | 400.00 |
| | nildcare and children's education costs | 8. | \$ | 0.00 |
| _ | othing, laundry, and dry cleaning | 9. | \$ | 20.00 |
| | ersonal care products and services | 10. | \$ | 10.00 |
| | edical and dental expenses | 11. | \$ | |
| | ansportation. Include gas, maintenance, bus or train fare. | 11. | Ψ | 0.00 |
| D | o not include car payments. | 12. | \$ | 250.00 |
| 3. E i | ntertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| . С | naritable contributions and religious donations | 14. | \$ | 0.00 |
| . In | surance. | | | |
| D | o not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15 | ia. Life insurance | 15a. | \$ | 0.00 |
| 15 | b. Health insurance | 15b. | \$ | 0.00 |
| 15 | ic. Vehicle insurance | 15c. | \$ | 70.00 |
| 15 | id. Other insurance. Specify: | 15d. | \$ | 0.00 |
| . Та | exes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | pecify: | 16. | \$ | 0.00 |
| | stallment or lease payments: 'a. Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | b. Car payments for Vehicle 2 | 17a. 17b. | · | 0.00 |
| | c. Other. Specify: | 17b. | \$ | |
| | | 17c. 17d. | · | 0.00 |
| | 'd. Other. Specify: our payments of alimony, maintenance, and support that you did not report as | | \$ | 0.00 |
| | educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | \$ | 0.00 |
| | ther payments you make to support others who do not live with you. | | \$ | 0.00 |
| | pecify: | 19. | · | 0.00 |
| | ther real property expenses not included in lines 4 or 5 of this form or on Sche | | our Income. | |
| | a. Mortgages on other property | 20a. | | 0.00 |
| | b. Real estate taxes | 20b. | | 700.00 |
| | Dc. Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | od. Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | De. Homeowner's association or condominium dues | 20e. | | 0.00 |
| | ther: Specify: | 21. | · | 0.00 |
| | | | τ φ | 0.00 |
| | alculate your monthly expenses | | | 4 500 00 |
| | 2a. Add lines 4 through 21. | | \$ | 1,530.00 |
| | 2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22 | c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 1,530.00 |
| . C | alculate your monthly net income. | | L | |
| 23 | Ba. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,530.00 |
| 23 | b. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 1,530.00 |
| | | | | |
| 23 | c. Subtract your monthly expenses from your monthly income. | | | 2 000 00 |
| | The result is your monthly net income. | 23c. | \$ | 3,000.00 |
| Fo m | by you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you obdification to the terms of your mortgage? | | | or decrease because c |
| | No. | | | |
| - 17 | L Voc Explain here: | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|--|--|---------------------------|-----------------------------|--|---|
| Debtor 1 | Robert R. Donnel | lv | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF NEW YORK | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| If two married po You must file thi obtaining mone | eople are filing together | n connection with a bank | sible for supplying corre | ect information. Making a false state | ement, concealing property, or 00, or imprisonment for up to 20 |
| Sig | n Below | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attorr | ney to help you fill out ba | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | kruptcy Petition Preparer's Notice, ,, and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sumr | nary and schedules filed | l with this declaration | on and |
| X /s/ Rol | bert R. Donnelly | | X | | |
| Rober | t R. Donnelly | | Signature of D | Debtor 2 | |
| Signatu | ire of Debtor 1 | | | | |
| Date _ | March 8, 2017 | | Date | | |

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| | in this inform | nation to identify you | r 00001 | | | |
|-------------------|---|--|--|---|---|---|
| _ | | nation to identify you | | | | |
| De | btor 1 | Robert R. Donne First Name | Middle Name | Last Name | | |
| | btor 2 | First Name | Middle News | LastNama | | |
| ` ' | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRICT (| OF NEW YORK | | |
| | se number | | | | | theck if this is an mended filing |
| Sta Be a | as complete a | of Financial | attach a separate sheet to | are filing together, both are | ankruptcy equally responsible for sup | |
| | | , | rital Status and Where You | Lived Before | | |
| 1. | What is you | r current marital statu | ıs? | | | |
| | ■ Married□ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. Lis | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | ·. | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No □ Yes. Ma | ike sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Pai | rt 2 Explai | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | - | of current year until d for bankruptcy: | ☐ Wages, commissions, bonuses, tips | \$8,228.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | Operating a business | | ☐ Operating a business | |

Official Form 107

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Case number (if known)

Debtor 1 Robert R. Donnelly

| | | | | | Debtor 1 | | | Debtor 2 | | |
|-----|----------------------|--------------------------------------|--|--|---|--------------------------------------|---|--|----------------------------|---|
| | | | | | Sources of income Check all that apply. | (before | s income re deductions and sions) | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | | | dar year: December : | 31, 2016) | ☐ Wages, commissions, bonuses, tips | | Unknown | ☐ Wages, com bonuses, tips | missions, | |
| | | | | | Operating a business | | | ☐ Operating a | business | |
| | | | lar year bef December 3 | | ☐ Wages, commissions, bonuses, tips | | Unknown | ☐ Wages, combonuses, tips | missions, | |
| | | | | | Operating a business | | | ☐ Operating a | business | |
| | Inclu and winn | ude ind other phings. I each s | ome regard oublic benef f you are fili | less of wheth it payments; ng a joint cas he gross inco | e during this year or the two er that income is taxable. Ex- consions; rental income; intel e and you have income that y me from each source separa | amples o rest; divid you recei | f other income are a dends; money collect ved together, list it o | alimony; child supp sted from lawsuits; only once under De | royalties; and ebtor 1. | ecurity, unemployment, d gambling and lottery |
| | | | | | Debtor 1 | | | Debtor 2 | | |
| | | | | | Sources of income Describe below. | each (before | s income from source re deductions and sions) | Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| Pai | rt 3: | List | Certain Pa | yments You | Made Before You Filed for | Bankrup | itcy | | | |
| 6. | Are | either | Debtor 1's | or Debtor 2' | s debts primarily consume | r debts? | | | | |
| | | No. | | | ebtor 2 has primarily consupersonal, family, or househo | | | s are defined in 11 | U.S.C. § 10 | 1(8) as "incurred by an |
| | | | During the No. | 90 days befo Go to line 7 | re you filed for bankruptcy, di | id you pa | y any creditor a tota | Il of \$6,425* or mo | re? | |
| | | | Yes | paid that cre not include | ach creditor to whom you pai editor. Do not include paymer payments to an attorney for the | nts for do his bankı | mestic support obliquetcy case. | gations, such as ch | nild support a | nd alimony. Also, do |
| | | Yes. | | | on 4/01/19 and every 3 year rboth have primarily consu | | | or after the date of | r adjustment. | • |
| | | | | | re you filed for bankruptcy, di | | | I of \$600 or more? |) | |
| | | | □ No. | Go to line 7 | | | | | | |
| | | | □ Yes | include pay | ach creditor to whom you pai ments for domestic support o this bankruptcy case. | | | | | |
| | Cre | editor' | s Name and | I Address | Dates of payme | ent | Total amount paid | Amount you still owe | Was this p | payment for |

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| 7. | Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any ge control, or owner of 20% | neral partners; partner or more of their voting | rships of which yo securities; and a | u are a general partner; corpora ny managing agent, including or | |
|----|--|--|--|---|---|------|
| | No | | | | | |
| | Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment | |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | yments or transfer a | ny property on a | ccount of a debt that benefite | d an |
| | ■ No□ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name | |
| Pa | rt 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the case | |
| | Federal National Mortgage Corporation vs. Robert R. Donnelly 2014/000296 | Foreclosure | Supreme Court County P.O. Box 1766 Binghamton, N | | ■ Pending□ On appeal□ Concluded | |
| | U.S. Bank, N.A. vs. Robert R. Donnelly CA2013-386 | Foreclosure | Supreme Court County P.O. Box 1766 Binghamton, N | | ■ Pending□ On appeal□ Concluded | |
| | Broome County Real Property vs. Robert R. Donnelly | Foreclosure | Supreme Court County P.O. Box 1766 Binghamton, N | | ■ Pending □ On appeal □ Concluded | |
| | Earl Gordon, Ethel Gordon, Jonas Naschin, Marie Naschin vs. Robert Donnelly 2016001608 | Foreclosure | Supreme Court County P.O. Box 1766 Binghamton, N | | ■ Pending □ On appeal □ Concluded | |
| | Sean J. Britton, Broome County Director of Health vs. Robert Donnelly | Administrative Order - County fine | Broome County of Health 225 Front Stree Binghamton, N | t | ☐ Pending ☐ On appeal ☐ Concluded | |
| | | | | | | |

Case 17-60290-6-dd Doc 1 Filed 03/17/17 Entered 03/17/17 16:56:57 Page 52 of 69 Case number (if known) Document Debtor 1 Robert R. Donnelly 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Amount Date action was 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Value Describe what you contributed Dates vou more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

Yes. Fill in the details.

Person Who Was Paid Address **Email or website address** Person Who Made the Payment, if Not You Description and value of any property transferred

Date payment or transfer was made

Amount of payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Robert R. Donnelly

| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and v transferred | alue of any pro | perty | Date payment or transfer was made | Amount of payment |
|-----|--|--|-----------------------------|------------------|--|---|
| | Orville & McDonald Law, PC 30 Riverside Dr. Binghamton, NY 13905 | | | | | \$1,640.00 |
| 17. | Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or Do not include any payment or transfer that you list | or to make payments | | | r transfer any prope | rty to anyone who |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | Description and v transferred | alue of any pro | perty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already list. No | ness or financial affa as security (such as t | irs? he granting of a | , , | | , |
| | Yes. Fill in the details. | Description and w | alua af | Dagariba | | Data transfer was |
| | Person Who Received Transfer Address Person's relationship to you | Description and v property transferr | | | any property or received or debts change | Date transfer was made |
| 19. | Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection) | | y property to a | self-settled tru | ıst or similar device | of which you are a |
| | No Yes. Fill in the details. | non devices.) | | | | |
| | Name of trust | Description and v | alue of the prop | erty transferr | ed | Date Transfer was made |
| Par | t 8: List of Certain Financial Accounts, Instru | uments, Safe Deposit | Boxes, and Sto | orage Units | | |
| 20. | Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o | • | | | • • | |
| | houses, pension funds, cooperatives, associateNoYes. Fill in the details. | tions, and other finan | cial institutions | 5. | | |
| | | ast 4 digits of ccount number | Type of accou instrument | clo | te account was sed, sold, oved, or nsferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | r before you filed for | bankruptcy, an | y safe deposi | t box or other deposi | itory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, State and ZIP Code) | | Describe the | contents | Do you still have it? |

| Deb | otor 1 | Robert R. Donnelly | Document Page 54 o | | sc Main |
|-----|----------|--|---|--------------------------------------|-----------------------|
| 22. | = | e you stored property in a storage unit or p No Yes. Fill in the details. | lace other than your home within 1 | year before you filed for bankruptcy | ? |
| | | ne of Storage Facility Iress (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
| Par | t 9: | Identify Property You Hold or Control for | Someone Else | | |
| 23. | for s | ou hold or control any property that some comeone. | one else owns? Include any proper | ty you borrowed from, are storing fo | r, or hold in trust |
| | | No Yes. Fill in the details. | | | |
| | | ner's Name Iress (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
| Par | t 10: | Give Details About Environmental Inform | ation | | |
| For | he p | urpose of Part 10, the following definitions | apply: | | |
| | toxic | ironmental law means any federal, state, or substances, wastes, or material into the a lations controlling the cleanup of these su | nir, land, soil, surface water, ground | | |
| | | means any location, facility, or property as | • | law, whether you now own, operate, | or utilize it or used |
| | | wn, operate, or utilize it, including disposal ardous material means anything an environ | | s waste hazardous substance toxic | substance |
| _ | | rdous material, pollutant, contaminant, or | | waste, nazardous substance, toxic | substance, |
| Rep | ort al | I notices, releases, and proceedings that y | ou know about, regardless of wher | n they occurred. | |
| 24. | Has | any governmental unit notified you that yo | u may be liable or potentially liable | under or in violation of an environm | ental law? |
| | _ | No Yes. Fill in the details. | | | |
| | | ne of site Iress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 25. | Have | e you notified any governmental unit of any | release of hazardous material? | | |
| | | No Yes. Fill in the details. | | | |
| | | ne of site Iress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 26. | Have | you been a party in any judicial or admini | strative proceeding under any envi | ironmental law? Include settlements | and orders. |
| | | No Yes. Fill in the details. | | | |
| | | e Title e Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
| Par | t 11: | Give Details About Your Business or Cor | nnections to Any Business | | |

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

Official Form 107

Case 17-60290-6-dd Doc 1 Filed 03/17/17 Entered 03/17/17 16:56:57 Desc Main Page 55 of 69 Document ase number (if known) Debtor 1 Robert R. Donnelly ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert R. Donnelly Signature of Debtor 2 Robert R. Donnelly Signature of Debtor 1 Date March 8, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

| Fill in this information to identify your case: | | | | | |
|---|--------------------------|-------------------------------|--|--|--|
| Debtor 1 | Robert R. Donnelly | | | | |
| Debtor 2 (Spouse, if filing) | | | | | |
| United States B | ankruptcy Court for the: | Northern District of New York | | | |
| Case number (if known) | | | | | |

| Check | Check as directed in lines 17 and 21: | | | | | |
|-------|--|--|--|--|--|--|
| 1 | According to the calculations required by this Statement: | | | | | |
| | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). | | | | | |
| | 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). | | | | | |
| | 3. The commitment period is 3 years. | | | | | |
| | 4. The commitment period is 5 years. | | | | | |

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

| Part | 1: Calculate Your Average Monthly Income | | | | | | | | |
|--|--|-------------|----------|--------|--------------------|----------------------|--------|--|--|
| 1. | What is your marital and filing status? Check one | only. | | | | | | | |
| | □ Not married. Fill out Column A, lines 2-11. | | | | | | | | |
| | ■ Married. Fill out both Columns A and B, lines 2-1 | 1. | | | | | | | |
| Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. | | | | | | | | | |
| | | | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing spouse | |
| 2. | Your gross wages, salary, tips, bonuses, overtime payroll deductions). | e, and co | mmissio | ons (b | efore all | \$ | 0.00 | \$ | |
| 3. | Alimony and maintenance payments. Do not include Column B is filled in. | de payme | nts from | a spoi | | \$ | 0.00 | \$ | |
| 4. | 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. | | | | | \$ | 0.00 | \$ | |
| 5. | Net income from operating a business, profession, or farm | Debtor | 1 | | | | | | |
| | Gross receipts (before all deductions) | S | 4,24 | 7.33 | | | | | |
| | Ordinary and necessary operating expenses -\$ | 3 | 61 | 6.67 | | | | | |
| | Net monthly income from a business, profession, or farm \$ | S | 3,63 | 0.67 | Copy here -> \$ | 3,0 | 630.67 | \$ | |
| 6. | Net income from rental and other real property | Debtor | 1 | | | | | | |
| | Gross receipts (before all deductions) | \$_ | 0.00 | | | | | | |
| | Ordinary and necessary operating expenses | -\$_ | 0.00 | | | | | | |
| | Net monthly income from rental or other real property | <i>'</i> \$ | 0.00 | Copy | / here -> : | \$ | 0.00 | \$ | |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Robert R. Donnelly Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 3.630.67 + \$ 3,630.67 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 3,630.67 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 3,630.67 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 3,630.67 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 43,568.04 15b. The result is your current monthly income for the year for this part of the form.

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| Debte | or 1 | Rob | pert R. Donnelly | | | Case number (if known) | | | |
|-------|--------------|-----------|---|-------------------------|------------------------|--|-------------|---------------------------------------|---------|
| 16 | . Cal | culate | e the median family income that applies to | you. Follo | ow these s | teps: | | | |
| | 16a | . Fill i | n the state in which you live. | 1 | NΥ | _ | | | |
| | 16b | . Fill ii | n the number of people in your household. | | 1 | | | | |
| | | | n the median family income for your state and | d size of ho | ousehold. | _ | \$ | 50,768.0 | 00 |
| | | | nd a list of applicable median income amount uctions for this form. This list may also be ava | | | | Ψ. | | |
| 17 | . Hov | | the lines compare? | allable at t | ne bankiu | picy derk's office. | | | |
| | 17a | | Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do | | | | | | under |
| | 17b | . C | Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14. | culation o | | | | | |
| Par | t 3: | Ca | alculate Your Commitment Period Under 11 | 1 U.S.C. § | 1325(b)(4 |) | | | |
| 18. | Cop | у уо | ur total average monthly income from line | 11 . | | | \$ | 3,630 | 0.67 |
| 19. | con | tend t | he marital adjustment if it applies. If you are hat calculating the commitment period under income, copy the amount from line 13. | e married, 11 U.S.C. | your spou § 1325(b) | use is not filing with you, and you (4) allows you to deduct part of your | | | |
| | 19a | . If the | e marital adjustment does not apply, fill in 0 or | n line 19a. | | | - \$ | (| 0.00 |
| | | | | | | | | | |
| | 19b | . Sub | tract line 19a from line 18. | | | | \$_ | 3,630.6 | 57 — |
| | ٠. | | | - " . | | | | | |
| 20. | | _ | e your current monthly income for the year | | | | æ | 3,630.6 | 37 |
| | 20a | | y line 19b | | | | Φ. | · · · · · · · · · · · · · · · · · · · | |
| | | Mult | iply by 12 (the number of months in a year). | | | | | x 12 | |
| | 20b | . The | result is your current monthly income for the | year for th | is part of t | he form | \$ | 43,568.0 |)4 |
| | | | , | • | · | | | | |
| | | | | | | | | | |
| | 20c | . Cop | y the median family income for your state and | d size of ho | ousehold f | rom line 16c | \$ | 50,768.0 |)0_ |
| | 21 | Ном | do the lines compare? | | | | | | |
| | ۷۱. | _ | · | | | | | _ | |
| | | | Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4. | vise ordere | ed by the c | ourt, on the top of page 1 of this form, ch | neck box 3, | The commitm | nent |
| | | | Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4. | Jnless othe | erwise ord | ered by the court, on the top of page 1 of | this form, | check box 4, | The |
| Par | t 4: | Si | gn Below | | | | | | |
| | By s | signin | g here, under penalty of perjury I declare that | t the inform | nation on t | his statement and in any attachments is | true and co | rrect. | |
| > | (/s/ | Rob | ert R. Donnelly | | | | | | |
| | | | R. Donnelly re of Debtor 1 | | _ | | | | |
| | • | • | arch 8, 2017 | | | | | | |
| | | MN | I/DD /YYYY | _ | | | | | |
| | • | | ecked 17a, do NOT fill out or file Form 122C-2 | | 0-11-51 | Dot that famous | | | |
| | If yo | ou che | ecked 17b, fill out Form 122C-2 and file it with | i this form. | On line 39 | → or tnat form, copy your current monthly | income fro | m line 14 abo | ve. |

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Debtor 1 Robert R. Donnelly Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2016 to 02/28/2017.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: **Rental income** Income/Expense/Net by Month:

| | Date | Income | Expense | Net |
|---------------|--------------------|------------|-----------------------------|------------|
| 6 Months Ago: | 09/2016 | \$4,464.00 | \$440.00 | \$4,024.00 |
| 5 Months Ago: | 10/2016 | \$3,664.00 | \$750.00 | \$2,914.00 |
| 4 Months Ago: | 11/2016 | \$4,664.00 | \$800.00 | \$3,864.00 |
| 3 Months Ago: | 12/2016 | \$4,464.00 | \$780.00 | \$3,684.00 |
| 2 Months Ago: | 01/2017 | \$3,664.00 | \$480.00 | \$3,184.00 |
| Last Month: | 02/2017 | \$4,564.00 | \$450.00 | \$4,114.00 |
| _ | Average per month: | \$4,247.33 | \$616.67 | |
| | | | Average Monthly NET Income: | \$3,630.67 |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-60290-6-dd Doc 1 Filed 03/17/17 Entered 03/17/17 16:56:57 Desc Main Document Page 64 of 69

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of New York

| In re | Robert R. Donnelly | | Case No. | | | |
|-------|--|--|--|---------------------------|-------------|--|
| | | Debtor(s) | Chapter | 13 | | |
| | DISCLOSURE OF COMP | ENSATION OF ATTO | RNEY FOR DE | CBTOR(S) | | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplatio | ling of the petition in bankruptcy | , or agreed to be paid | to me, for services rende | ered or to | |
| | For legal services, I have agreed to accept | | \$ | 4,325.00 | | |
| | Prior to the filing of this statement I have receive | d | \$ | 1,640.00 | | |
| | Balance Due | | \$ | 2,685.00 | | |
| 2. | The source of the compensation paid to me was: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed cor | mpensation with any other person | unless they are mem | pers and associates of m | y law firm. | |
| | ☐ I have agreed to share the above-disclosed compecopy of the agreement, together with a list of the r | | | | firm. A | |
| 5. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspec | ts of the bankruptcy c | ase, including: | | |
| | a. Analysis of the debtor's financial situation, and rer b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] Representation of the debtor in contest | tatement of affairs and plan which litors and confirmation hearing, a | n may be required; nd any adjourned hea | rings thereof; | etcy; | |
| 6. | By agreement with the debtor(s), the above-disclosed Any necessary adversary proceedings Loss Mitigation proceedings | | g service: | | | |
| | | CERTIFICATION | | | | |
| | I certify that the foregoing is a complete statement of bankruptcy proceeding. | any agreement or arrangement for | payment to me for re | epresentation of the debt | or(s) in | |
| N | March 8, 2017 | /s/ Peter A. Orvill | e | | | |
| Date | | | Peter A. Orville 1735935 - New York | | | |
| | | Signature of Attorna Orville & McDona | | | | |
| | | 30 Riverside Driv | re · | | | |
| | | Binghamton, NY 607-770-1007 Fa | | | | |
| | | Name of law firm | | | | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF NEW YORK

| In re | Robert R. Donnelly | , | |
|--------|---|---|-------------------------------------|
| | DBA Bob's Property Maintenance | · | |
| | Debtor | Case No. | |
| | | Chapter | 13 |
| Socia | l Security No(s). and all Employer's Tax I 4-4359 | <u> </u> | _ |
| | CERTIFICAT | ION OF MAILING MATRE | <u>X</u> |
| | I,(we), Peter A. Orville 1735935 - New York | _, the attorney for the debtor/pe | etitioner (or, if appropriate, the |
| debtor | r(s) or petitioner(s)) hereby certify under the | he penalties of perjury that the | above/attached mailing matrix |
| has be | en compared to and contains the names, a | ddresses and zip codes of all pe | ersons and entities, as they appear |
| on the | schedules of liabilities/list of creditors/list | t of equity security holders, or | any amendment thereto filed |
| herew | ith. | | |
| | | | |
| Dated | : March 8, 2017 | | |
| | | /s/ Peter A. Orville | <u> </u> |
| | | Peter A. Orville 1735935 - | |
| | | Attorney for Debtor/Pe (Debtor(s)/Petitioner(s | |

Brian Hime 61 Homer St. Binghamton, NY 13905

Broome Co. Dept. of Finance Box 1766 Broome Co. Office Bldg. Binghamton, NY 13902

Capital One Bank USA, N.A. P.O. Box 30281 Salt Lake City, UT 84130

Chase Bank Attn: Bankruptcy Department P.O. Box 15299 Wilmington, DE 19850

Credit Protection Assoc. 13355 Noel Rd. Dallas, TX 75240

Daniel Blatt 1082 East 9th St. Brooklyn, NY 11230

Direct TV P.O. Box 6550 Greenwood VIllage, CO 80155-6550

Earl & Ethel Gordon 2045 Gulf Of Mexico Dr. Apt. 412 Longboat Key, FL 34228

Eric M. Berman PC 500 North Gulph Road, Suite 350 King Of Prussia, PA 19406

G. Paul Cohen & Sherry Cohen 6564 Meandering Way Bradenton, FL 34202

GHS Federal Credit Union 910 Front Street Binghamton, NY 13902

Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114

Janice Carmine 416 West Benita Blvd. Vestal, NY 13850

Jonas & Marie Nachsin 359 5th St. Brooklyn, NY 11215

Kovarik True Value 276 Clinton St. Binghamton, NY 13905

Kurt Beyer 29 Meadow Lake Rd. Mahwah, NJ 07430

Law Office of Burr & Reid Attn: Collection Supervisor P.O. Box 2308 Binghamton, NY 13902

Midland Credit Management Inc. 8875 Aero Drive, Suite 200 San Diego, CA 92123-2255

Midland Funding LLC 8875 Aero Drive, Suite 200 San Diego, CA 92123

Navient Solutions, Inc. Attn: Bankruptcy Dept. P.O. Box 9430 Wilkes Barre, PA 18773

NYS Dept. of Taxation & Finance Bankruptcy Section PO Box 5300 Albany, NY 12205 NYS Workers Compensation Board Attn: Bankruptcy Department 328 State Street Schenectady, NY 12308

NYSEG 18 Link Drive Binghamton, NY 13902-5224

NYSEG PO Box 5600 Ithaca, NY 14852

Portfolio Recovery Associates 120 Corporate Blvd Norfolk, VA 23502

Pressler & Pressler, LLP 305 Broadway, 9th Floor New York, NY 10007

Robert Behnke, Esq. Broome Count Attorney 60 Hawley St. PO Box 1766 Binghamton, NY 13902

Robert Molino 6056 East Peppertree Way Sarasota, FL 34242

Rosicki, Rosicki & Associates, P.C. 2 Summit Court, Ste. 301 Fishkill, NY 12524

Rubin & Rothman, LLC 1787 Veterans Highway Islandia, NY 11722

Sage Supply
85 Main St.
Johnson City, NY 13790

Seterus Inc. 14523 SW Millikan Way Ste 200 Beaverton, OR 97005 Sid Krepel 10485 Terra Lago Dr. West Palm Beach, FL 33412

Steve Rowell PO Box 501 Vestal, NY 13850

United Health Services 10-42 Mitchell Avenue Binghamton, NY 13903

United Health Services PO Box 5214 Binghamton, NY 13902

United Student Aid Funds C/O Sallie Mae PO Box 9460 MCE2142 Wilkes-Barre, PA 18773-9460

Visions Federal Credit Union 24 McKinley Ave. Endicott, NY 13760

Wells Fargo Home Mortgage PO Box 10335 Des Moines, IA 50306